FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. \$1983 IN THE UNITED STATES DISTRICT COURT

FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

COMPLAINT

Malle	ett #	168918		SOUTHERN OF TRANSPORT
(Last Na		entification Number)	. *	The state of the s
(First N		(Middle Name)		MAY 2.4 2017
(Institut	County Farm	Rd Raymond (MS		BY
	V.	CIVIL	ACTION NUMBER:	(to be completed by the Court)
Mac V:ct	or P Mason	Warden	-	(to be completed by
Del	Nagne	OWERS Dep	wta	
(Enter the	CU De	ndant(s) in this action)	puty Allen	
		GENER	AL INFORMATION	
Α.	At the time of	f the incident compla No ()	ined of in this complain	nt, were you incarcerated?
В.	Are you preso	ently incarcerated? No ()		
C.		f the incident compla convicted of a crime No ()		nt, were you incarcerated because
D.	Are you pres	ently incarcerated for No ()	a parole or probation v	violation?
E.	At the time Mississippi I	of the incident component of Correct No ()	plained of in this comp stions (MDOC)?	laint, were you an inmate of the
F.	Are you curr Yes ()	ently an inmate of the	e Mississippi Departme	ent of Corrections (MDOC)?

PARTIES

(In item I below, place your name and address in the second blank.)	prisoner number in the first blank and place your present
I. Name of plaintiff: Marcus W	1911ett Prisoner Number: 144049
Address: 1456 County Jarm	Rd.
Raymond, MS 39154	
second blank, and his place of employ names, positions and places of employ	of the defendant in the first blank, his official position in the ment in the third blank. Use the space below item II for the ment of any additional defendants.)
II. Defendant: Mary Kushin, Victor Ma	ason Donagenis employed as Warden? Sheriff
Dupty Lacy at 14 Depity Allen	So county form Rd. Raymond, MS 39154
The plaintiff is responsible for providinew address of plaintiff as well as the plaintiff is required to complete the period of the providing plaintiff is required to complete the period of the peri	ng his/her address and in the event of a change of address, the name(s) and address(es) of each defendant(s). Therefore, the ortion below:
PLAINTIFF:	
NAME: Marcas E Mallett	ADDRESS: 1450 county farm Rd. Raymond MS 3454
DEFENDANT(S):	
NAME: Mary Rushin	ADDRESS: 1450 county Farm Rd. Roymond M
Victor p Mason	1950 county form Rd. Raymond MS 39154
Dawayne Owens	1450 County Farm Rd. Raymond MS 341)
Lacy Dupty	1450 County form Rd, Raymond MS 39154 1450 County Farm Rd, Raymond, MS 39154
Allert Deputy	1450 County Farm Role Raymend, MIS 39154 Page 2 of 4

OTHER LAWSUITS FILED BY PLAINTIFF

NOTICE AND WARNING

The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

A.	Have y	ou ever filed any lawsuits in a court of the United States? Yes () No			
В.	If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse of this page or additional sheets of paper.)				
CASE	E NUMB				
	1.	Parties to the action:			
	2.	Court (if federal court, name the district; if state court, name the county):			
	3.	Docket Number:			
	4.	Name of judge to whom case was assigned:			
	5.	Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?)			
CAS	E NUMI 1.	BER 2. Parties to the action:			
	1.				
	2.	Court (if federal court, name the district; if state court, name the county):			
	3.	Docket Number:			
	4.	Name of judge to whom case was assigned:			
	5.	Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?)			

STATEMENT OF CLAIM

involve any leg claims, need; a	ere as briefly as possible the facts of your case. Describe how each defendant is ed. Also, include the names of other persons involved, dates and places. Do not give all arguments or cite any cases or statutes. If you intend to allege a number of different number and set forth each claim in a separate paragraph. (Use as much space as you trach extra sheet(s) if necessary). Das jump and in HCDC by 3 officers for nothing and boxs sent to the hispital and I didn't get know Tetice.
	May 6 2017 2:00 p.m or 3:38 p.m
2	Shirt. Dawayne Owers Deputy, Locy Deputy, and Aller
201	rictor P Mason He have housed in B-3
55c	I with no lights no air I been over here
Since	May the 3 and rite now May 20.35
IV. State	Rushin She talk to me about it but they Still here and I relief don't see no Justice, can use help me, care I need surfice. what relief you seek from the court. Make no legal arguments. Cite no cases or es. ecdom and 100,000 or my Freedom \$50,000
	Signed this Mag day of 20, 20, 7
and assumed	I declare (or certify, verify or state) under penalty of perjury that the foregoing is true
and correct.	Signature of plaintiff